EVIDENCE BASED TREATMENT

4-1-2021

POLICY

All state operated and contracted juvenile justice residential treatment facilities are to implement and provide evidence-based, outcome-driven treatment programs and services designed to effectively address the needs of the youth and ensure the successful performance of the youth and their family while in placement and upon reentry into the community.

DEFINITIONS

See JRG, JJ Residential Glossary.

RESPONSIBLE STAFF

Designated in the facility standard operating procedure.

PROCEDURE

The primary focus of a residential intervention must be to engage and support family members, caregivers and identified permanent connections in learning the skills and support in identifying and connecting with resources and supports to ensure a youth can live in the community successfully.

Note: For those youth with no identified permanent family and connection, the primary and urgent focus will be on permanency.

State and contracted juvenile justice residential treatment facilities are required to develop and implement standard operating procedures (SOPs) pertaining to the implementation of evidence-based treatment approaches for the rehabilitation of youth.

Contracted facilities are also required to implement standard operating procedures (SOPs) pertaining to the implementation of Qualified Residential Treatment Programming (QRTP) requirements; see FOM 912-1 Residential Care Program
Requirements, for details on Qualified Residential Treatment Programming.

At a minimum, these SOPs must contain the following requirements out lined in this policy.

SERVICES TO BE PROVIDED

Facility director and/or designee is responsible for ensuring the utilization of evidence-based theory and methods to guide treatment approaches. The facility director and/or designee ensures that:

- Evidence-based, outcomes-driven treatment approaches being utilized are specifically identified and documented.
- The size of the youth population, the nature of the youth population (risk level, types of offenses, gender, etc.), the average length of stay for youth, the number of available staff and volunteers, and the available resources are considered.
- All staff working directly or indirectly with youths are knowledgeable as to the treatment programs available to youths at their site and can articulate the key elements of the programs.
- Daily programming supports treatment methods through the provision of structured therapeutic activities.
- National Child Traumatic Stress Network Essential Elements are incorporated into daily practice through:
 - Trauma-informed policies and procedures.
 - Identification/screening of youth who have been traumatized.
 - Clinical assessment/intervention for trauma-impaired youth.
 - •• Trauma-informed programming and staff education.
 - Prevention and management of secondary traumatic stress.
 - Trauma-informed partnering with youth and families.
 - Trauma-informed cross system collaboration.
 - Trauma-informed approaches to address disparities and diversity.

Basic Components of Trauma-Responsive Care

Treatment approaches include:

- Structured, intense activities for changing specific behaviors.
- Modification techniques aimed at:
 - Reducing risk factors.
 - Addressing criminogenic factors.
 - Addressing negative thinking of youths.
- Cognitive-behavioral therapy/treatment, dialectical behavioral therapy, multi-systemic therapy, functional family therapy.
- Family members in the treatment and rehabilitation of their youth.
- Integrated and multi-modal or multi-component activities.
- Respects the inherent value and potential of every person.

LEGAL BASE

Federal

Social Security Act, 42 USC 672(4)(A)-(F)

Provides requirements on what the term *qualified residential treatment program* means.

Preventing Sex Trafficking and Strengthening Families Act, Public Law 113-183. Section 111 Supporting Normalcy for Children in Foster Care

Section 111 of this act establishes standards for normalcy for a child who is in the custody of the state and includes a Reasonable and Prudent Parent Standard and normalizing activities for youth.